

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

## UTILITY PATENT APPLICATION TRANSMITTAL LETTER

## MAIL STOP PATENT APPLICATION

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Customer No. 2 1 8 3 9

Sir:						
<u>ART</u>	Encle ICLE	osed for filing is the utility patent application of <u>Helena Corneliusson</u> for <u>ABSORBENT</u>				
	[ ]	Applicant(s) suggest(s) Figure _ for inclusion on the front page of the patent application publication and patent.				
	[X]	Applicant(s) requests that the published application include the following assignment information: <u>SCA Hygiene Products AB</u> .				
	Also enclosed are:					
	[X]	sheet(s) of drawings;				
	[ ]	a claim for foreign priority under 35 U.S.C. §§ 119 and/or 365 is [ ] hereby made to $\_$ filed in $\_$ on $\_$ ;				
		[ ] in the declaration;				
	[ ]	a certified copy of the priority document;				
	[ ]	a General Authorization for Petitions for Extensions of Time and Payment of Fees;				
	[X]	an Assignment document;				
	[X]	an Information Disclosure Statement;				
	[ ]	a patent application data sheet; and				
	[ ]	Other:				
	[X]	An [X] executed [ ] unexecuted declaration of the inventor(s)				
		[X] also is enclosed [ ] will follow.				
	rп	Small entity status is hereby claimed				

[X] The filing fee has been calculated as follows [ ] and in accordance with the enclosed preliminary amendment:

		CLA	IMS		
	No. OF CLAIMS		EXTRA CLAIMS	RATE	FEE
Basic Application Fee	\$770.00 (1001)				
Total Claims	13	MINUS 20 =	0	× \$18.00 (1202) =	
Independent Claims	1	MINUS 3 =	0	× \$86.00 (1201) =	
If multiple dependent c	laims are pre	sented, add \$290.	00 (1203)		
Total Application Fee	\$770.00				
If small entity status is	claimed, sub	tract 50% of Tota	l Application	Fee	
Add Assignment Recording Fee \$40.00 (8021) if Assignment document is enclosed					\$40.00
TOTAL APPLICATION FEE DUE					\$810.00

[]	This application is being filed without a filing fee. Issuance of a Notice to File Missing Parts of Application is respectfully requested.					
[X]	A check in the amount of \$ 810.00 is enclosed for the fee due.					
[ ]	Charge \$ to Deposit Account No. 02-4800 for the fee due.					
[X]	The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.					

Please address all correspondence concerning the present application to:

BURNS, DOANE, SWECKER & MATHIS, L.L.P. Customer Number: 2 1 8 3 9

P.O. Box 1404

Alexandria, Virginia 22313-1404.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Date: March 3, 2004

William C. Rowland Registration No. 30,888

P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620